



SOUTHERN ILLINOIS SELECT BASEBALL LEAGUE

TOURNAMENT REGISTRATION FORM

Tournament Name	<u>Memorial Day Tournament</u>
Tournament Date	<u>May 27th, 28th, 29th</u>
Team Name	_____
Division	_____
Coach/Manager Name	_____ _____
Coach/Manager Phone No.	_____ _____
Coach/Manager Email Address	_____ _____

March Madness Tournament Entry Fee: \$100. Gate Fee of \$4/person. Under 3 is free.

Entry fee must accompany this registration form. Please make check payable to SISBL and send to the following address:

Glen Polacek
202 North Monroe Street
Freeburg, IL 62243